**CHAPTER 798-X-4  
Scope of Practice**  
  
**798-X-4 Scope of Practice**  
The Scope of Practice for a licensed respiratory therapist is defined in Section 34-27B-2, Code of Alabama (1975). Respiratory therapy or care includes, but is not limited to, the following activities conducted upon written prescription, verbal order, or medically approved protocol:  
  
(1) Direct and indirect pulmonary care services that are safe, aseptic, preventive, or restorative to the patient.  
  
(2) Direct and indirect respiratory therapy or care, including, but not limited to, the administration of pharmacologic, diagnostic, and therapeutic agents related to respiratory therapy procedures necessary to implement a treatment, disease prevention, pulmonary rehabilitative, or diagnostic regimen prescribed by a physician.  
  
(3) Observation and monitoring of signs and symptoms, general behavior, and general physical response to respiratory therapy treatment and diagnostic testing and determination of whether such signs, symptoms, reactions, behavior, or general responses exhibit abnormal characteristics and implementation, based on observed abnormalities, of appropriate reporting or referral practices or prescribed and medically approved respiratory therapy protocols or appropriate changes in a treatment regimen, pursuant to a prescription by a physician, or the initiation of emergency procedures.  
  
(4) The diagnostic and therapeutic use of any of the following, in accordance with the prescription of a physician:  
(a) Administration of medical gases, excluding for purposes of anesthesia.  
(b) Aerosols.  
(c) Humidification.  
(d) Environmental control systems and hyperbaric therapy.  
(e) Pharmacologic agents related to respiratory therapy procedures, excluding administration of intravenous medications except those necessary for maintenance of patency of intravenous and intra-arterial lines.  
(f) Mechanical or physiological ventilatory support.  
(g) Bronchopulmonary hygiene.  
(h) Cardiopulmonary resuscitation   
(i) Maintenance of natural airways.  
(j) Insertion without cutting tissues and maintenance of artificial airways.  
(k) Diagnostic and testing techniques required for implementation of respiratory therapy protocols.  
(l) Invasive or noninvasive collections of specimens of blood and other body fluids including specimens from the respiratory tract.  
(m) Collections of inspired and expired gas samples.  
(n) Analysis of blood, and gases, and respiratory secretions.  
(o) Measurements of ventilatory volumes, pressures, and flows.  
(p) Pulmonary function testing.  
(q) Hemodynamic monitoring and other related physiologic measurements of the cardiopulmonary system.  
(r) Respiratory telecommunications.  
(s) Cardiopulmonary disease management   
(t) Tobacco cessation   
  
(5) The transcription and implementation of the written and verbal orders of a physician pertaining to the practice of respiratory therapy.  
  
(6) Institution of known and medically approved protocols relating to respiratory therapy in emergency situations in the absence of immediate direction by a physician and institution of specific procedures and diagnostic testing related to respiratory therapy as ordered by a physician to assist in diagnosis, monitoring, treatment and medical research.  
  
(7) Delivery of respiratory therapy procedures, instruction, and education of patients in the proper methods of self-care and prevention of cardiopulmonary diseases and other conditions requiring the use of respiratory therapy equipment or techniques.  
  
**Author: The Alabama State Board of Respiratory Therapy  
Statutory Authority: Code of Alabama (1975) § 34-27B-1 thru § 34-27B-17. Effective Date: March 24, 2006**

**798-X-5-.16 Exemptions from Licensure**

Nothing in these rules shall be construed as preventing or restricting the practice, services, or activities of the following:  
  
(1) Any person who is licensed in Alabama or certified by the organization accredited by the National Commission for Certifying Agencies and acceptable to the state from engaging in the profession or occupation for which the person is licensed or certified.   
  
(2) Any person employed by the United State government who provides respiratory therapy solely under the direction or control of the United States government agency or organization.  
  
(3) Any person receiving clinical training while pursuing a course of study leading to registry or certification in a respiratory therapy educational program accredited by the CAAHEP in collaboration with the CoARC or their successor organizations. This person will be under direct supervision and be designated by a title clearly indicating his or her status as a student or trainee.  
  
(4) Any emergency medical technician licensed by the Alabama State Board of Health who is providing care to a patient at the scene of an emergency, or during transport of the patient in a licensed ground ambulance, provided that such care may not exceed the scope of care permissible under the rules of the Alabama State Board of Health.  
  
(5) The delivery of respiratory therapy of sick or disabled persons by family members or domestic servants, or the care of non-institutionalized persons by a surrogate family member, as long as the persons do not represent themselves as, or hold themselves out to be, respiratory therapists.  
  
(6) Any individual who has demonstrated competency in one or more areas covered by these rules as long as the individual performs only those functions that he or she is qualified by examination to perform. The standards of the National Commission for Certifying Agencies, or its equivalent, shall serve as a standard with which to evaluate those examinations and examining organizations.  
  
(7) Any person performing respiratory services or care not licensed as a respiratory therapist in accordance with these rules who is employed in a diagnostic laboratory, physician's office, clinic, or outpatient treatment facility and whose function is to administer treatment or perform diagnostic procedures confined to that laboratory, office clinic, or outpatient facility under the direction of a licensed physician.  
  
(8) Any respiratory therapy student who performs limited respiratory therapy procedures as an employee of any health care provider organization while enrolled in a respiratory therapy educational program accredited by the CAAHEP in collaboration with the CoARC or their successor organizations. The employee will be designated by title as a student or trainee and work under direct supervision.  
  
(9) Any individual employed by a durable medical equipment or home medical equipment company who delivers, sets up, or maintains respiratory equipment but not including assessment or evaluation of the patient.  
  
(10) Any individual employed as a polysomnographic technologist working in a sleep center or diagnostic sleep clinic.  
  
(11) Any licensed respiratory therapist performing advances in the art and techniques of respiratory therapy learned through special training acceptable to the board.  
  
**Author: The Alabama State Board of Respiratory Therapy**  
**Statutory Authority: Code of Alabama (1975) § 34-27B-1 thru § 34-27B-17.**  
**Effective Date: October 11, 2007**  
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